

EXHIBIT A

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cardinal Ally, Inc.
c/o Registered Agent
Richard Topping
4855 Milestone Ave.
Kannapolis, NC 28091



9590 9403 0373 5163 6280 30

2. Article Number (Transfer from service label)

7016 0340 0000 9958 8415

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

[Handwritten: RICHARD TOPPING]

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☒ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

☐ Signature Confirmation™

☒ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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70160340000099588415

70160340000099588415



Delivered:

KANNAPOLIS, NC 28081 on August 31, 2016 at 1:26 pm

Updated Delivery Day:

Wednesday, August 31, 2016